

County: Columbia
COLUMBIA HEALTH CARE CENTER
P. O. BOX 895

Facility ID: 2310

Page 1

WYOCENA 53969 Phone: (608) 429-2181
Operated from 1/1 To 12/31 Days of Operation: 365
Operate in Conjunction with Hospital? No
Number of Beds Set Up and Staffed (12/31/01): 129
Total Licensed Bed Capacity (12/31/01): 148
Number of Residents on 12/31/01: 110

Ownership:
Highest Level License: County
Operate in Conjunction with CBRF? Skilled
Title 18 (Medicare) Certified? No
Title 19 (Medicaid) Certified? Yes
Average Daily Census: 119

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/01)				Length of Stay (12/31/01)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		30.9
Supp. Home Care-Personal Care	No					1 - 4 Years		41.8
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	4.5	More Than 4 Years		27.3
Day Services	No	Mental Illness (Org./Psy)	40.9	65 - 74	11.8			-----
Respite Care	No	Mental Illness (Other)	9.1	75 - 84	43.6			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	30.9	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	9.1	Full-Time Equivalent		
Congregate Meals	No	Cancer	1.8		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	6.4		100.0	(12/31/01)		
Other Meals	No	Cardiovascular	10.9	65 & Over	95.5	-----		
Transportation	No	Cerebrovascular	9.1		-----	RNs		8.8
Referral Service	No	Diabetes	1.8	Sex	%	LPNs		6.8
Other Services	No	Respiratory	7.3		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	12.7	Male	26.4	Aides, & Orderlies		
Mentally Ill	No		-----	Female	73.6			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

Method of Reimbursement

Level of Care	Medi care (Title 18)			Medi caid (Title 19)			Other		Pri vate Pay			Fami ly Care		Managed Care			Total Resi - dents	% Of All		
	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)					
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0	
Skilled Care	9	100.0	325	73	92.4	103	0	0.0	0	21	95.5	146	0	0.0	0	0	0.0	0	103	93.6
Intermediate	---	---	---	5	6.3	85	0	0.0	0	1	4.5	144	0	0.0	0	0	0.0	0	6	5.5
Limited Care	---	---	---	1	1.3	73	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	0.9
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	9	100.0		79	100.0		0	0.0		22	100.0		0	0.0		0	0.0		110	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/01				
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Percent Admissions from		Activities of	%	% Needing Assistance of	% Totally Dependent	Total Number of Residents
Private Home/No Home Health	4.7	Daily Living (ADL)	Independent	One Or Two Staff		
Private Home/With Home Health	0.9	Bathing	0.9	67.3	31.8	110
Other Nursing Homes	1.9	Dressing	10.0	70.0	20.0	110
Acute Care Hospitals	84.0	Transferring	20.9	58.2	20.9	110
Psych. Hosp. -MR/DD Facilities	2.8	Toilet Use	13.6	64.5	21.8	110
Rehabilitation Hospitals	0.0	Eating	26.4	55.5	18.2	110
Other Locations	5.7	*****				
Total Number of Admissions	106	Continence	%	Special Treatments	%	
Percent Discharges To:		Indwelling Or External Catheter	8.2	Receiving Respiratory Care	20.0	
Private Home/No Home Health	19.2	Occ/Freq. Incontinent of Bladder	52.7	Receiving Tracheostomy Care	0.0	
Private Home/With Home Health	9.6	Occ/Freq. Incontinent of Bowel	32.7	Receiving Suctioning	0.9	
Other Nursing Homes	1.6	Mobility		Receiving Ostomy Care	1.8	
Acute Care Hospitals	12.8			Receiving Tube Feeding	6.4	
Psych. Hosp. -MR/DD Facilities	2.4	Physically Restrained	3.6	Receiving Mechanically Altered Diets	44.5	
Rehabilitation Hospitals	0.0	Skin Care		Other Resident Characteristics		
Other Locations	6.4			Have Advance Directives	86.4	
Deaths	48.0	With Pressure Sores	11.8	Medications		
Total Number of Discharges (Including Deaths)	125	With Rashes	5.5	Receiving Psychoactive Drugs	57.3	

Selected Statistics: This Facility Compared to All Similar Urban Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Government Peer Group %	Ratio	Bed Size: 100-199 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	80.1	84.8	0.95	84.1	0.95	85.8	0.93	84.6	0.95
Current Residents from In-County	88.2	58.7	1.50	79.3	1.11	69.4	1.27	77.0	1.15
Admissions from In-County, Still Residing	29.2	27.8	1.05	25.5	1.15	23.1	1.26	20.8	1.41
Admissions/Average Daily Census	89.1	58.7	1.52	110.2	0.81	105.6	0.84	128.9	0.69
Discharges/Average Daily Census	105.0	61.8	1.70	110.6	0.95	105.9	0.99	130.0	0.81
Discharges To Private Residence/Average Daily Census	30.3	18.7	1.62	41.2	0.73	38.5	0.79	52.8	0.57
Residents Receiving Skilled Care	93.6	84.8	1.10	93.8	1.00	89.9	1.04	85.3	1.10
Residents Aged 65 and Older	95.5	87.6	1.09	94.1	1.01	93.3	1.02	87.5	1.09
Title 19 (Medicaid) Funded Residents	71.8	79.8	0.90	66.9	1.07	69.9	1.03	68.7	1.05
Private Pay Funded Residents	20.0	16.3	1.23	23.1	0.86	22.2	0.90	22.0	0.91
Developmentally Disabled Residents	0.0	0.8	0.00	0.6	0.00	0.8	0.00	7.6	0.00
Mentally Ill Residents	50.0	50.0	1.00	38.7	1.29	38.5	1.30	33.8	1.48
General Medical Service Residents	12.7	17.8	0.71	21.8	0.58	21.2	0.60	19.4	0.66
Impaired ADL (Mean)	54.4	43.4	1.25	48.4	1.12	46.4	1.17	49.3	1.10
Psychological Problems	57.3	61.6	0.93	51.9	1.10	52.6	1.09	51.9	1.10
Nursing Care Required (Mean)	11.4	8.4	1.35	7.5	1.52	7.4	1.53	7.3	1.55